

**Fill in this information to identify your case:**

Debtor 1	<u>Larry</u>	<u>Scott</u>	<u>Rogers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>SOUTHERN DISTRICT OF TEXAS</u>			
Case number (if known)			

☐ Check if this is an amended filing**Official Form 122A-1Supp****Statement of Exemption from Presumption of Abuse Under § 707(b)(2)**

12/15

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

**Part 1: Identify the Kind of Debts You Have**

1. **Are your debts primarily consumer debts?** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).

☒ No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

☐ Yes. Go to Part 2.

**Part 2: Determine Whether Military Service Provisions Apply to You**

2. **Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?**

☐ No. Go to line 3.

☐ Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

☐ No. Go to line 3.

☐ Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1 *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. **Are you or have you been a Reservist or member of the National Guard?**

☐ No. Complete Form 122A-1. Do not submit this supplement.

☐ Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)

☐ No. Complete Form 122A-1. Do not submit this supplement.

☐ Yes. Check any one of the following categories that applies:

☐ I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

☐ I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_ which is fewer than 540 days before I file this bankruptcy case.

☐ I am performing a homeland defense activity for at least 90 days.

☐ I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now* and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

**Fill in this information to identify your case:**

Debtor 1	<u>Larry</u>	<u>Scott</u>	<u>Rogers</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number  
(if known) \_\_\_\_\_

**Check one box only as directed in this form and in Form 122A-1Supp:**

- ☒ 1. There is no presumption of abuse.
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

☐ Check if this is an amended filing

**Official Form 122A-1****Chapter 7 Statement of Your Current Monthly Income**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income**

1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☐ Married and your spouse is NOT filing with you. You and your spouse are:
- ☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- ☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). \_\_\_\_\_
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \_\_\_\_\_
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. \_\_\_\_\_

Debtor 1 **Larry** **Scott** **Rogers** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

Column A  
Debtor 1

Column B  
Debtor 2 or  
non-filing spouse

**5. Net income from operating a business, profession, or farm**

	Debtor 1	Debtor 2	
Gross receipts (before all deductions)	_____	_____	
Ordinary and necessary operating expenses	— _____	— _____	
Net monthly income from a business, profession, or farm	_____	_____	Copy here → _____

**6. Net income from rental and other real property**

	Debtor 1	Debtor 2	
Gross receipts (before all deductions)	_____	_____	
Ordinary and necessary operating expenses	— _____	— _____	
Net monthly income from rental or other real property	_____	_____	Copy here → _____

**7. Interest, dividends, and royalties**

\_\_\_\_\_

\_\_\_\_\_

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \_\_\_\_\_↓

For you..... \_\_\_\_\_

For your spouse..... \_\_\_\_\_

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\_\_\_\_\_

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_

\_\_\_\_\_

Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

**11. Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\_\_\_\_\_ + \_\_\_\_\_ = \_\_\_\_\_

Total current  
monthly income

Debtor 1 Larry Scott Rogers Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 2: Determine Whether the Means Test Applies to You**
**12. Calculate your current monthly income for the year. Follow these steps:**

12a. Copy your total current monthly income from line 11.....**Copy line 11 here** → 12a.  

Multiply by 12 (the number of months in a year). **X 12**

12b. The result is your annual income for this part of the form. 12b.  

**13. Calculate the median family income that applies to you. Follow these steps:**

Fill in the state in which you live.  

Fill in the number of people in your household.  

Fill in the median family income for your state and size of household..... 13.  

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

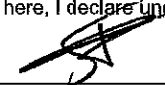
**14. How do the lines compare?**

14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3.

14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X**   
 Larry Scott Rogers, Debtor 1  
 Date 3/20/16  
 MM / DD / YYYY

**X** \_\_\_\_\_  
 Signature of Debtor 2  
 Date \_\_\_\_\_  
 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

**Current Monthly Income Calculation Details**

In re: **Larry Scott Rogers**

Case Number:

Chapter: **7**

**Underlying Allowances (as of 03/15/2016)**In re: **Larry Scott Rogers**

Case Number:

Chapter: **7**

<b>Median Income Information</b>	
State of Residence	Texas
Household Size	5
Median Income per Census Bureau Data	\$72,612.00 + (1 x \$8,100.00) = \$80,712.00

<b>National Standards: Food, Clothing, Household Supplies, Personal Care, and Miscellaneous</b>	
Region	US
Family Size	5
Gross Monthly Income	\$0.00
Income Level	Not Applicable
Food	\$821.00
Housekeeping Supplies	\$78.00
Apparel and Services	\$244.00
Personal Care Products and Services	\$70.00
Miscellaneous	\$300.00
Additional Allowance for Family Size Greater Than 4	\$378.00
<b>Total</b>	<b>\$1,891.00</b>

<b>National Standards: Health Care (only applies to cases filed on or after 1/1/08)</b>	
<b>Household members under 65 years of age</b>	
Allowance per member	\$60.00
Number of members	0
Subtotal	\$0.00
<b>Household members 65 years of age or older</b>	
Allowance per member	\$144.00
Number of members	0
Subtotal	\$0.00
<b>Total</b>	<b>\$0.00</b>

<b>Local Standards: Housing and Utilities</b>	
State Name	Texas
County or City Name	Montgomery County
Family Size	Family of 5 or more
Non-Mortgage Expenses	\$635.00
Mortgage/Rent Expense Allowance	\$1,557.00
Minus Average Monthly Payment for Debts Secured by Home	\$0.00
Equals Net Mortgage/Rental Expense	\$1,557.00
Housing and Utilities Adjustment	\$0.00

**Underlying Allowances (as of 03/15/2016)**In re: **Larry Scott Rogers**

Case Number:

Chapter: **7**

<b>Local Standards: Transportation; Vehicle Operation/Public Transportation</b>		
Transportation Region	Houston	
Number of Vehicles Operated	2 or more	
Allowance	\$624.00	
<b>Local Standards: Transportation; Additional Public Transportation Expense</b>		
Transportation Region	Houston	
Allowance (if entitled)	\$185.00	
Amount Claimed	\$0.00	
<b>Local Standards: Transportation; Ownership/Lease Expense</b>		
Transportation Region	Houston	
Number of Vehicles with Ownership/Lease Expense	2 or more	
	<b>First Car</b>	<b>Second Car</b>
Allowance	\$517.00	\$517.00
Minus Average Monthly Payment for Debts Secured by Vehicle	\$0.00	\$0.00
Equals Net Ownership / Lease Expense	\$517.00	\$517.00